

THE CITY OF GARDNER AFFORDS EQUAL EMPLOYMENT OPPORTUNITY REGARDLESS OF SEX, AGE, RACE, COLOR, CREED, ANCESTRY, SEXUAL PREFERENCE, RELIGION, DISABILITY, MILITARY STATUS, GENETICS OR NATIONAL ORIGIN.

APPLICATION FOR EMPLOYMENT

| | | | |
|---|-----------------|--|---|
| Last Name | First | Middle | Date |
| Street Address | | | Home Phone |
| | | | () |
| City, State, Zip | | | Business Phone |
| | | | () |
| Have you ever applied for employment or been employed with us? | | | |
| Yes | No | If Yes, Month and Year _____ Location: _____ | |
| Position Desired | Shift Desired | | Pay Expected |
| | 1 st | 2 nd | |
| Are you available for full-time work? | | | Will you work overtime if asked? |
| Yes No | | | Yes No |
| Are you a U.S. citizen or authorized to work in the U.S.? | | | When will you be available to begin work? |
| Yes No | | | |
| How did you learn of our organization? If Newspaper, state which publication. | | | |

Completion of this section is voluntary, unless education is requirement of the position you are applying for.

| | Name & Location of School | Course of Study | No. of Years Completed | Degree or Diploma |
|-------------|---------------------------|-----------------|------------------------|-------------------|
| High School | | | | |
| College | | | | |
| Other | | | | |

Describe your significant accomplishments, activities, or acquired skills, which you believe may be an indication of your job-related abilities.

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer. As part of your work history, you may include verified work performed on a volunteer basis.

| | | |
|----|---|---|
| 1. | Company Name | Telephone () |
| | Address | Employed (State Month & Year) From To |
| | Name of Supervisor | Weekly Pay: Start End |
| | State Job Titles and Describe your work | Reason for Leaving |

| | | |
|----|---|---|
| 3. | Company Name | Telephone () |
| | Address | Employed (State Month & Year) From To |
| | Name of Supervisor | Weekly Pay: Start End |
| | State Job Titles and Describe your work | Reason for Leaving |

- 1.
- 2.
- 3.

Date: _____ Signature: _____

RELEASE

I have authorized City of Gardner to investigate my character and ability to perform the job for which I am applying. In order to conduct this investigation, I understand that City of Gardner will make inquiries of my previous employers, schools and references. As such, I hereby authorize the provision of character, education and job performance information by my previous employers, schools and references to City of Gardner and release all parties from any liability related to the release of said information. The requested information may include, but it is not limited to:

Dates of employment
Position held
Wages/Salary
Reason for separation from company
Disciplinary actions
Course of study
Verification of completion of degree
Character reference information

Signature

Print Name

All requested information should be released City of Gardner upon receipt of a photocopy of this release, as if it were the original.